

Constitution, held that each major form of polity is animated by a distinct spirit, which he called, in the title of his classic work, "The Spirit of the Laws." In a monarchy, he said, the dominant spirit is honor; in a despotism, it is fear, and in a republic the spirit must be virtue.

The founding fathers of our nation agreed. Our first three presidents, Washington, Jefferson, and John Adams, spoke eloquently of the necessity for civic virtue to undergird the health of our republic. Our fourth president, James Madison, wrote to the same effect: "To suppose any form of government will secure liberty or happiness without any virtue in the people is a chimerical idea."

Civic virtue, of course, is not a substitute for law. In a complex society such as ours, many laws are needed to coordinate social relationships. We justly pride ourselves in having a government of laws that prevents tyranny and capriciousness. But it is possible, in the absence of virtue, to put too much stock on law. Alexis de Tocqueville, a keen observer of the American scene, said that the Europeans of his day gave too much emphasis to laws and too little to mores. In the United States, he contended, customs and religious beliefs pervaded social life so thoroughly that the laws could be less onerous.

Where virtue prevails, laws will be framed with a view to the common good, not private self-interest. The laws, perceived as agreeing with the norms of justice, will carry moral authority. A virtuous people will feel obliged in conscience to obey them. But if laws are framed to satisfy the interests of particular groups, they will lose their moral authority, and the citizens will feel entitled to disobey, provided they do not get caught. Vice and criminality will proliferate.

Civilization depends on habits of the heart. It requires citizens who can trust one another to be honest, considerate, and truthful. When trust evaporates, the law has to assume a coercive function, compelling people to obey against their will. Elaborate mechanisms of surveillance, prosecution, and punishment must be erected. An army of auditors, detectives, police, attorneys, trial judges, and prison guards strives in vain to secure the order that responsible freedom would achieve. Free society gradually transforms itself into a police state.

In our litigious society, thirst for gain almost eclipses the passion for justice. Friends and family members readily take each other to court. Malpractice suits and the cost of insurance are forcing doctors and other professionals to abandon their practice. The courts are congested with heavy backlogs. We build more and larger prisons, which prove only to be schools of crime.

As men and women of the law, you know well that virtue cannot be legislated. But your concern for the law itself must give you a sense of the importance of moral convictions and moral training for the health of our society.

In our American tradition, great reliance has been placed on private institutions that directly inculcate virtue. Families, schools, and churches are among the primary agents for transmitting sound moral values.

The family, as the nucleus where life is born and where coming generations are formed, is today under severe pressure. It needs to be protected so that children can be raised in a stable and healthy environment. Broken homes and dysfunctional families are breeding-grounds of crime.

Schools extend the pedagogical functions of the family. To the degree that public education fails to instill moral convictions and behavior, this task will fall more heavily on private institutions, especially those conducted under religious auspices. Schools of

this character fill the void left by value-free institutions that limit themselves to factual information and technical skills.

Religious institutions are of inestimable importance for transmitting moral probity. Perceiving this, John Adams declared: "Our Constitution was made only for a moral and religious people. It is wholly inadequate for the government of any other." George Washington said much the same: "Reason and experience both forbid us to expect that national morality can prevail to the exclusion of religious principle." The government cannot establish in this country any given religion, but it can protect and support religion as an aid to civic virtue.

Law and spirit belong together. They are as inseparable as body and soul. Law, at least civil law, is a human achievement, but the spirit, if it is to be upright, depends chiefly upon the grace of God, who can transform our hearts and fill them with his love. May God forgive us for having so often tried to do without him! In prayer and worship we beseech him to impart a generous measure of his Spirit on our nation, its governors, and those who frame, interpret, and apply its laws.

#### HONORING REVEREND ROGER TOBIN

#### HON. ILEANA ROS-LEHTINEN

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, November 4, 2003*

Ms. ROS-LEHTINEN. Mr. Speaker, I would like to recognize Reverend Roger Tobin of St. Thomas Episcopal Church, in my Congressional District, on the 25th Anniversary of his ordination.

Reverend Tobin is an outstanding member of the South Florida community who enlightens and inspires all who are blessed to know him. Through his dynamic leadership during the last 17 years at St. Thomas, Reverend Tobin has seen both the church and the school double in size, a true testament to his unwavering dedication to his church community. Not only is Reverend Tobin striving to improve the physical plant at St. Thomas through a major reconstruction project, but he is also striving to deepen his own intellectual and spiritual life through a personal retreat.

I ask my colleagues to join me in congratulating Reverend Tobin on 25 years of tireless service to the Episcopal Church. Thank you Reverend, and may God continue to bless you, your lovely wife, Janice, and your sons, Jonathan and Nathaniel as you continue your mission.

#### H.R. 3407 AND SUPPLEMENTAL APPROPRIATIONS BILL

#### HON. BARBARA LEE

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, November 4, 2003*

Ms. LEE. Mr. Speaker, my deepest sympathies go out to the Californians who are suffering in the devastating wake of the fires currently raging in the Southern part of my home state. I want to be clear: I unequivocally support the federal disaster assistance that California and Californians will require to rebuild in the aftermath of the tragic fires. That is why I

am an original cosponsor of H.R. 3407, the California Funding for Immediate Relief of Wildfire Emergencies Act, which provides an emergency appropriation to FEMA of \$500 million for disaster relief associated with the fires.

What I am opposed to, however, is the shameful, politically motivated decision to include the \$500 million in FEMA funding in a bill that deals with the most serious question of war. Mr. Speaker, I cannot, and will not vote for almost \$87 billion to fund the Bush Administration's continuing war in Iraq, and just as I voted against the original Supplemental Appropriations bill, I will vote against this conference report.

#### HONORING ROCHESTER GENERAL HOSPITAL

#### HON. LOUISE MCINTOSH SLAUGHTER

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, November 4, 2003*

Ms. SLAUGHTER. Mr. Speaker, today I rise to pay special tribute to the Rochester General Hospital located in Rochester, New York, a 526-bed Center of Excellence within the boundaries of the 28th Congressional District of New York. The hospital, which is home to the Rochester Heart Institute, is New York's fourth largest cardiac center, providing complete diagnostic services, medical, invasive, and non-invasive treatment, three progressive levels of cardiac rehabilitation and state-of-the-art cardiothoracic surgery.

This year, the century-old teaching hospital has been named a 2003 Solucient 100 Top Cardiovascular Hospital. Although the hospital has received this designation three previous times, the 2003 distinction is especially meaningful, as it is one of only two hospitals in New York State so distinguished.

The fifth annual study, Solucient 100 Top Hospitals Cardiovascular Benchmarks for Success—2003, used publicly available data, statistically adjusted for illness levels, to track performance in seven key cardiology/cardiac surgery areas. Specifically, hospitals that cared for at least 20 cases in each of the four categories of acute myocardial infarction (heart attack), congestive heart failure, angioplasty (PTCA) and coronary artery bypass graft surgery (CABG) were rated by the seven following indicators: procedure volume, risk-adjusted medical mortality, risk-adjusted surgical mortality, risk-adjusted complications index, percentage of CABG patients with internal mammary artery use, severity-adjusted average length of stay, and wage and severity-adjusted average cost.

Rochester General Hospital's designation as one of America's Top 100 Cardiovascular Hospitals is particularly important to health care consumers. The aforementioned study concluded that facilities found worthy of this distinction consistently outperform their peers, especially in terms of mortality and complication rates. This specific achievement is evidence that the skilled performance and excellent outcomes in cardiovascular services at Rochester General Hospital of Rochester, New York have propelled the hospital to the top one per cent of acute-care hospitals in the United States of America.

It is indeed my great privilege, as the elected Representative of the 28th Congressional

District of New York, to formally honor Rochester General Hospital of Rochester, New York, for having achieved excellence in the area of heart care, as an integrated source for patient cardiovascular needs, from prevention and education to diagnosis, treatment and recovery.

IN RECOGNITION OF THE HOUSTON  
AREA NETWORK ONLINE COMMUNITY (HAN-NET)

**HON. CHRIS BELL**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, November 4, 2003*

Mr. BELL. Mr. Speaker, I rise to honor The Houston Area Network Online Community (HAN-NET), a forum for gay, lesbian, bisexual, and transgender activists and others committed to the cause of equality and civil rights for all. HAN-NET has been in operation since November 1998 and is ceasing operations on November 1, 2003.

Throughout its existence and operation, HAN-NET has informed, challenged and inspired the Houston GLBT community and has been extremely successful in accomplishing its mission to simplify and accelerate communication within the Houston GLBT community.

HAN-NET, a Yahoo groups "listserv," has enhanced GLBT community communication through its online announcements, news, and dialogue. HAN-NET has made pertinent information immediately accessible to its members. Information reached members directly and was packaged for quick redistribution.

The HAN-NET online community participated in several collaborative efforts including establishing community priorities and activist goals for the Houston GLBT community. I strongly support these goals which include: focusing on local and state political issues impacting the GLBT community; finding a new home and permanent funding for the Houston Lesbian and Gay Community Center; finding permanent funding for the operation and growth of the Gulf Coast Archives and Museum; building a strong corporate network group; supporting HIV education and prevention; and establishing an educational outreach program for the transgender community.

It is my sincere hope that the success of HAN-NET will inspire other community leaders to continue and grow the mission of its founders.

I know my colleagues join me in congratulating HAN-NET moderator Brandon J. Wolf and the HAN-NET online community for a job well done for Houston's GLBT community. Mr. Wolf's commitment to improved communication and outreach for the past five years has been inspiring and extremely worthwhile. I wish him great success in his continued work for the GLBT community.

PERSONAL EXPLANATION

**HON. LUIS V. GUTIERREZ**

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, November 4, 2003*

Mr. GUTIERREZ. Mr. Speaker, I was unavoidably absent from this Chamber on Octo-

ber 29, 2003. I would like the record to show that had I been present in this Chamber, I would have voted "nay" on rollcall votes 574 and 575. I also would have voted "yea" on rollcall votes 576, 577, 578 and 579.

VETERANS HEALTH CARE FACILITIES  
CAPITAL IMPROVEMENT  
ACT

SPEECH OF

**HON. JOEL HEFLEY**

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, October 29, 2003*

Mr. HEFLEY. Mr. Speaker, I rise today in support of H.R. 1720, the Veterans Health Care Facilities Capital Improvement Act, a two-year authorization bill that will authorize the Secretary of Veterans Affairs to carry out major medical facility construction projects to improve, renovate, replace, update or establish patient care facilities of the Department of Veterans Affairs.

In addition to authorizing \$168 million for fiscal year 2004 and \$600 million for fiscal year 2005 for construction of undesignated major projects, H.R. 1720 also authorizes the Secretary of Veterans Affairs to carry out a major medical facility project at the former Fitzsimons Army Medical Center site in Aurora, Colorado. H.R. 1720 would authorize this project to be carried out using a total appropriation of \$300 million.

Mr. Speaker, since the end of World War II, the Veterans Medical Center in Denver and the University of Colorado hospitals have shared expensive and specialized medical equipment and facilities, such as surgical suites and imaging equipment. This partnership has also included the sharing of expensive specialty diagnostics and medical treatments.

Due to the lack of space, inability to renovate or construct newer facilities and the cost associated with continuing to use the site, the University of Colorado Hospital moved its campus in 1995 to the former Fitzsimons Army Medical Center. This site is four and one half times the size of the existing campus and provides the school with a new medical complex for the 21st century.

As the University completes its move to Fitzsimons, a state of the art medical campus will be developed and many of the very best services in the United States will be available. For example, the Anschutz Cancer Pavilion, which is already open, is among the best institutions in the nation for all types of cancer treatment and research. In addition, the University of Colorado Health Sciences Center is well known throughout the country for its organ transplant programs.

While the move to the Fitzsimons site solved existing problems and provided future advantages for the University of Colorado Hospital, it unfortunately separated the Denver Veterans Medical Center from both the University of Colorado Health Sciences Center and the University of Colorado Hospital by eight miles. While the University of Colorado Hospital and the Veterans Medical Center continue to share medical resources, this eight mile separation creates a very real and significant barrier to quality care for veterans who receive their care at the Denver Veterans Medical Center.

Compounding this problem, a recent study commissioned by the Veterans Integrated Service Network (VISN) 19 indicated that high demand for medical services by veterans at the Denver Veterans Medical Center will continue unabated for the next 20 years. The cost of maintaining the current Denver Veterans Medical Center to satisfy minimal accreditation levels until 2020 has been estimated to be \$233 million, and estimates to rebuild the facility in 2020 are \$377 million in today's dollars.

Planning studies have shown that a move of the Denver Veterans Medical Center to the Fitzsimons campus is the most cost effective of the reasonably acceptable alternatives. Passage of H.R. 1720 will allow the Denver Veterans Medical Center to relocate to the Fitzsimons site and enjoy many of the same opportunities as the University of Colorado Health Sciences Center enjoys now. This will include, but is not limited to, solving aging facilities issues, capping new facilities cost, enhancing quality of medical care, increasing flexibility and reducing operational costs.

Veterans who have highly specialized medical needs must have easy access to the best diagnostic and treatment programs that America provides. In a medical school environment doctors tend to be better informed of the latest treatment procedures and protocols. They are closer to the "cutting edge" of modern medicine. Quality of medical care for veterans is enhanced in a medical school teaching hospital.

University physicians in specialty residency programs provide a significant amount of care in the Denver Veterans Medical Center. To date some 90 percent of the physicians that work at the VA Medical Center also work at University of Colorado Health Sciences Center and most VA doctors have faculty appointments in the Medical School. Co-locating the University of Colorado Hospital with the Denver Veterans Medical Center will allow University doctors to continue their close relationship in treating veterans. Not allowing the Denver Veterans Medical Center to move to the Fitzsimons campus is simply unacceptable and it would not be in the best interest of high quality patient care veterans deserve to abandon this partnership of over fifty years.

The new VA Medical Center at Fitzsimons site will be veteran-friendly and will provide a practicable alternative to the Denver Veterans Medical Center remaining at its current, outdated facility. The new Veterans Medical Center at Fitzsimons will be a free-standing ambulatory and inpatient care federal tower building for veterans, clearly identified as the Veterans Administration Medical Center with its own nearby parking. New veterans research facilities will be constructed and there will be a new veterans long-term care unit located next to the new 180-bed State veterans nursing home currently being constructed at the site.

This project has another group of potential beneficiaries, as well. The Department of Defense will likely construct a military treatment facility to meet the needs of Buckley Air Force Base. One attractive solution will be to meet the Buckley Air Force Base's military treatment facility requirements by participating in joint construction of a joint Denver Veterans Medical Center and a Department of Defense facility at Fitzsimons. The Air Force, as well as the Department of Defense, find this partnership to be in its long term interest. For this reason, the House-passed Fiscal Year 2004